



# **BCRS Management Information System Solution (BMISS)**

## ***NHSC Site Administrator Portal User Guide***

**September 7<sup>th</sup>, 2011**



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## SITE ADMINISTRATOR LANDING PAGE (OVERVIEW)

There are five main sections to the site administrator landing page:

**1) My Messages (pg. 5) & Account Settings (pg. 5)**

The site administrator can view messages sent from BCRS and update their account information

**2) NHSC Approved Sites (pg. 6)**

If the site administrator is a recognized point of contact (POC) at an NHSC approved site, those sites will appear here. Clicking on the name of a site will open that site's information page (pg. 15)

**3) NHSC Inactive Sites (pg. 7)**

If the site administrator is a recognized POC at an NHSC inactive site, those sites will appear here. Clicking on that name of a site will open that site's information page (pg. 15)

**4) Pending Site Applications (pg. 8)**

If the site administrator has either submitted an application for a site or is a POC at a site which has an application pending, those applications will appear here. Clicking on the ID will open that application.

**5) Need Assistance? (pg. 9)**

This section contains a number of tools for the site administrator as well as support contact information and a summary of all open requests.

The screenshot shows the BCRS PROGRAM PORTAL for SITE ADMINISTRATORS. The page is titled "My Sites" and lists NHSC Approved Sites, Inactive Sites, and Pending Site Applications. It also includes a "Need Assistance?" section with contact information and open requests.

**1** My Messages (1) Account Settings Log Out

**2** NHSC APPROVED SITES

Site Name	Address	Status	Expiration Date
Active Medical Site #1 ▶	123 Main Street Anytown, VA 555555555	Active (A)	08/23/2014
Active Medical Site #2 ▶	123 Main Street Anytown, VA 555555555	Active (A)	08/23/2014

**3** INACTIVE SITES

Site Name	Address	Status	Expiration Date
Inactive Medical Site #1 ▶	123 Main Street Anytown, VA 555555555	Inactive (I)	08/23/2014
Inactive Medical Site #2 ▶	123 Main Street Anytown, VA 555555555	Inactive (I)	08/23/2014

**4** PENDING SITE APPLICATIONS

Request ID#	Request Type	Site Name	Date Last Updated	Status
18304 ▶	Site Application	Sample Application	08/23/2011	In Progress

**5** Need Assistance?

I NEED TO ...

- Submit a New NHSC Site Application ▶
- Update My Contact Information ▶

CONTACT US


For support, please contact us at 1-877-313-1823, Monday through Friday (except Federal holidays), 8 am to 6 pm ET.

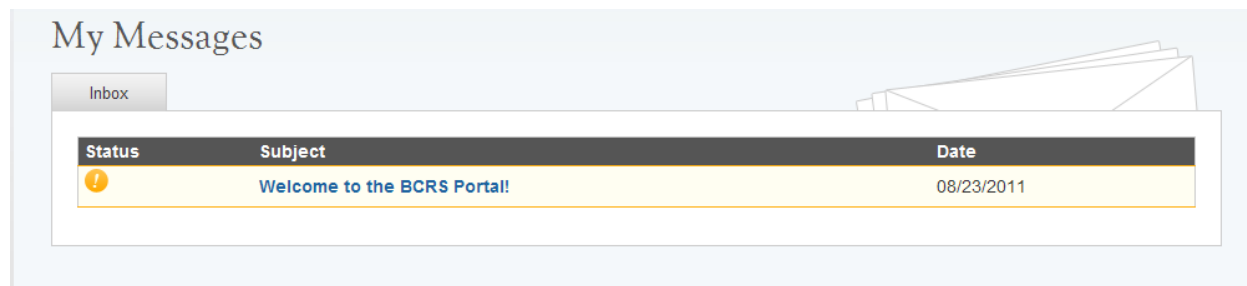
OPEN REQUESTS

Request ID#	Request Type	Site Name	Date Last Updated	Status
18304 ▶	Site Application	Sample Application	08/23/2011	In Progress




## MY MESSAGES

Selecting the “My Messages” link at the top of the landing page will open the site administrator’s message inbox. The exclamation icon (  ) next to the link indicates that a new message is available to view.



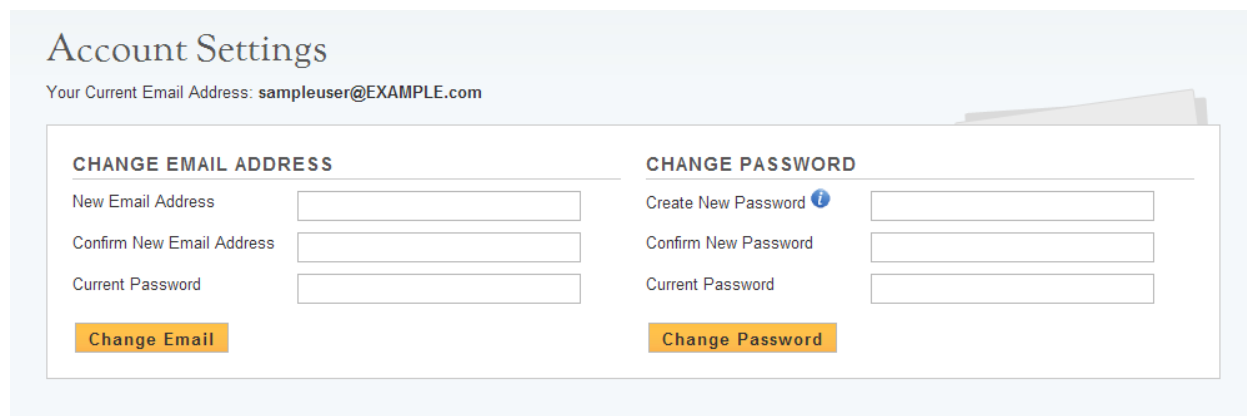
The inbox view includes the following information:

- 1) **Status** – Indicates the status of the message, an exclamation point (  ) indicates a new message
- 2) **Subject** – the subject of the message
- 3) **Date** – The date the message was received

Selecting the subject of the message in the inbox opens the message for viewing

## ACCOUNT SETTINGS

The Account Settings page allows the site administrator to update email and password information.

The screenshot shows the 'Account Settings' page. At the top is the title 'Account Settings'. Below it is the text 'Your Current Email Address: sampleuser@EXAMPLE.com'. The page is divided into two main sections: 'CHANGE EMAIL ADDRESS' and 'CHANGE PASSWORD'. The 'CHANGE EMAIL ADDRESS' section has three input fields: 'New Email Address', 'Confirm New Email Address', and 'Current Password', followed by a 'Change Email' button. The 'CHANGE PASSWORD' section has three input fields: 'Create New Password' (with an exclamation icon), 'Confirm New Password', and 'Current Password', followed by a 'Change Password' button.

## NHSC APPROVED SITES

The NHSC Approved Sites list contains all the NHSC sites that have the status of “active” that the site administrator is a point of contact at. If the site administrator feels that a site is missing from the site, please call 1-877-313-1823 for assistance. Clicking on a site’s name in the table will open that site’s specific site information page (pg. 15).

### — NHSC APPROVED SITES

Site Name	Address	Status	Expiration Date
Active Medical Site #1 ▶	123 Main Street Anytown, VA 555555555	Active (A)	08/23/2014
Active Medical Site #2 ▶	123 Main Street Anytown, VA 555555555	Active (A)	08/23/2014

The table includes the following information about approved sites:

- 4) **Site Name** – this is the name of the site
- 5) **Site Address** – this is the physical address for the site (mailing address is stored separately)
- 6) **Status** – for approved sites this is “active”  
“Active” sites are sites at which NHSC clinicians may serve and receive credit towards their service obligation
- 7) **Expiration Date** – this is the date by which the site will need to recertify with the NHSC  
Past the expiration date, a site will become “inactive” until a recertification for that site is approved (see NHSC Inactive Sites for more information)



## NHSC INACTIVE SITES

The NHSC Inactive Sites list contains all the NSHC sites that have the status of “inactive” and for which the site administrator is a point of contact. If the site administrator feels that a site is missing from the site, please call 1-877-313-1823 for assistance. Clicking on a site’s name in the table will open that site’s specific site information page (pg. 15).

### INACTIVE SITES

Site Name	Address	Status	Expiration Date
Inactive Medical Site #1 ▶	123 Main Street Anytown, VA 555555555	Inactive (I)	08/23/2014
Inactive Medical Site #2 ▶	123 Main Street Anytown, VA 555555555	Inactive (I)	08/23/2014

The table includes the following information about “inactive” sites:


- 1) **Site Name** – this is the name of the site
- 2) **Site Address** – this is the physical address for the site (mailing address is stored separately)
- 3) **Status** – for approved sites this is “Inactive”  
“Inactive” sites still appear in the NHSC database, but have the following restrictions
  1. NHSC Clinicians cannot receive credit for working at an “inactive” site
  2. “Inactive” sites may not post open positions to the Job Opportunities List
- 4) **Expiration Date** – this is the date by which the site will need to recertify with the NHSC



## PENDING SITE APPLICATIONS

The Pending Site Applications list contains all the NHSC applications either submitted by this site administrator or for sites for which this site administrator is a POC. If the site administrator feels that an application is missing from the site, please call 1-877-313-1823 for assistance. Clicking on a ID number in the table will open that application.

### PENDING SITE APPLICATIONS

Request ID#	Request Type	Site Name	Date Last Updated	Status
18304 	Site Application	Sample Applicaton	08/23/2011	In Progress

The table includes the following information about pending applications:

- 1) **Request ID#** – this is the unique ID number for the application
- 2) **Request Type** – this will always be “Site Application”
- 3) **Site Name** – This is the name of the site which the application is for
- 4) **Date Last Updated** – this is the date on which the application was last modified
- 5) **Status** – this is the current status of the application, the status can be as follows:
  1. In Progress – the application is incomplete and has not been submitted
  2. Submitted – the application has been sent, but not yet received by the State Primary Care Office (PCO)
  3. Pending PCO Review – the application is being reviewed by the State PCO
  4. Pending RO Review – the application is being reviewed by the Division of Regional Operations





## NEED ASSISTANCE?

The Need Assistance section provides the site administrator with tools to help manage their account and sites. In this section is also the number to call for support, common activities the site administrator can perform and a list of all open requests for that site administrator.

### Need Assistance?

**I NEED TO ...**

- [Submit a New NHSC Site Application](#)
- [Update My Contact Information](#)

**CONTACT US**

For support, please contact us at **1-877-313-1823**, Monday through Friday (except Federal holidays), 8 am to 6 pm ET.

**OPEN REQUESTS**

Request ID#	Request Type	Site Name	Date Last Updated	Status
<a href="#">18304</a>	Site Application	Sample Application	08/23/2011	In Progress

**Submit a New NHSC Site Application** – see pg. 10

The table includes the following information about pending applications:

1. **Request ID#** – this is the unique ID number for the application
2. **Request Type** – the type of request (i.e. Site Application, Site Recertification, Question, etc...)
3. **Site Name** – This is the name of the site which the request is associated with
4. **Date Last Updated** – this is the date on which the request was last modified
5. **Status** – this is the current status of the request, available statuses vary based on the request

## UPDATE MY CONTACT INFORMATION

Selecting Update My Contact Information opens the form to the right. Here the site administrator can update the following information about themselves:

- 1) **Phone Numbers** – Daytime, Mobile and Fax numbers
- 2) **Email and Password** – are handled through the Account Settings page (pg. 5)
- 3) **Work Address** – the address at which the site administrator works

### Update My Contact Information

Here's the information we have on record. To make any changes, simply click the box and enter the new information. Please note, changes will not take effect until you click the submit button, and you may be contacted by an NHSC Representative to confirm your changes.

**PHONE**

Daytime: (555) 555-5555

Mobile: (555) 555-5555

Fax: (555) 555-5555

**EMAIL AND PASSWORD**

Email addresses can only be edited on the [Account Settings](#) page.

**WORK ADDRESS**

Address Line 1: 123 Main Street

Address Line 2:

City: Anytown

State: Virginia

Zip: 55555

**SUBMIT**



## APPLYING FOR A NEW NHSC SITE

The site administrator portal allows site administrators to apply for new sites to become part of the NHSC. A site administrator can begin a new application by either selecting the “Apply for a New NHSC Site” button from the landing page, or by selecting the “Submit a New NHSC Site Application” in the Need Assistance Section.

**Start NHSC Site Application**

Welcome to the NHSC Online Site Application. If you are applying on behalf of a main/administrative site that provides clinical services AND satellite sites, please complete the main/administrative site application first.

Each site must have a separate application and meet the same eligibility criteria in order to be approved by the NHSC. Please note that approval of the main/administrative site does not indicate approval for the satellite sites. For a list of required documents by Site Type, please visit the [NHSC website](#).

**Please Note:** If your site is a Federally Qualified Health Center (FQHC) funded through the Health Resources and Services Administration (HRSA) Bureau of Primary Care (BPHC), then you do not need to submit a site application as your site has been deemed approved by the National Health Service Corps (NHSC). If you cannot see this site in the "NHSC Approved Sites" section of the portal, please contact us at 1-877-313-1823, Monday through Friday (except Federal holidays), 8 am to 6 pm ET.

Please select whether this application is for a main/administrative or satellite site:

☐ Main/Administrative Site  
☒ Satellite Site

**START MY APPLICATION**

When starting a new application, the site administrator must first select whether the site they are applying for is a Main/Administrative Site or a Satellite Site.

## CHOOSING A MAIN/ADMINISTRATIVE SITE (FOR SATELLITE SITES ONLY)

When starting an application for a satellite site, the site administrator must first identify a main/administrative site for the new satellite site.

**Site Information**  
\* Required Fields

As a satellite site, you need to identify your main/administrative site for our records. Please select one of the following options to identify your main/administrative site. \*

☐ Choose from My Sites  
☐ Search the NHSC database of existing approved sites  
☐ I will provide information on the main site

**CONTINUE**

The site administrator has three options for choosing a main/administrative site:

1. **Choose from My Sites** – allows the site administrator to select from a list of other sites they administer
2. **Search the NHSC Database** – search for an existing site in the NHSC database
3. **Provide Information** – enter new main/administrative site information



### Choosing a Main/Administrative Site from “My Sites”

Selecting “Choose from My Sites” displays a dropdown menu containing other sites the site administrator administers. To select a site, choose the site in the dropdown and select “Continue”. The main/administrative site’s information is automatically entered onto the application.

#### MY SITES

Site \*

CONTINUE

### Searching the NHSC Database for Sites

Selecting “Search the NHSC database of existing approved sites” displays a series of dropdown fields to allow the site administrator to search for a site using state, city and finally site name.

#### SEARCH FOR YOUR SITE IN THE DATABASE

State \*

City \*

Site \*

CONTINUE

To add a site through the search:

1. Select the state for the site you are searching for – the city dropdown will automatically filter by state
2. Select the city for the site you are searching for – the “site” dropdown will automatically filter by city
3. Select a site from the “site” dropdown

The main/administrative site’s information is automatically entered onto the application.

### Providing Main/Administrative Site Information

Selecting “I will provide information on the main site” displays a form for the site administrator to enter the main/administrative information for the new satellite site.

To complete the form, enter information in the fields and select “Continue”. Fields marked with an asterisk (\*) are required.

Please enter your main site's information:

Site Name \*   
Address Line 1 \*   
Address Line 2   
State/Province/Region \*   
City \*   
Zip/Postal Code \*   
Site Phone Number   
Site Fax Number   
Site E-mail Address   
Site Web Address


CONTINUE

The information is saved and the main/administrative site information is automatically entered onto the application.



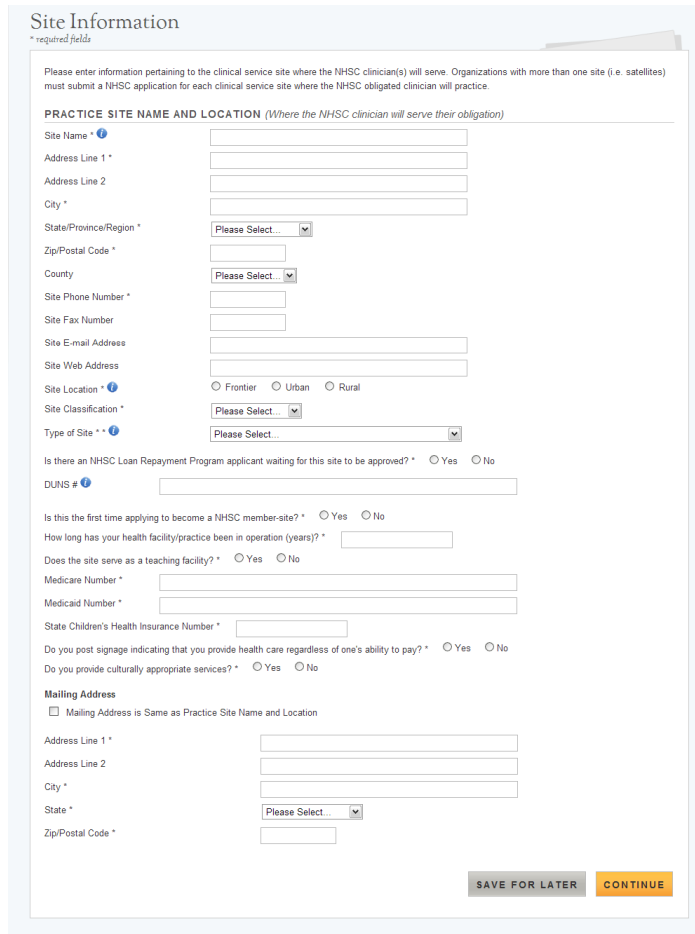
## APPLICATION SITE INFORMATION (1/4)

The first page of the site application captures the information for the site applying to become part of the NHSC.

The site administrator completes the fields on the form. All fields marked with an asterisk (\*) are required fields. Mouse over tooltip icons (  ) to view additional information about the field.

### Important Notes:

1. Address Information – this is the physical address of the site, there are separate fields for mailing address.
2. Type of Site – this field must be completed before the site administrator can continue to the next page.
3. If the site administrator indicates that an NHSC Loan Repayment Program applicant is waiting for the site to be approved an applicant name must be provided.
4. Medicaid, Medicare and State Children's Health Insurance Number fields are all text allowing the site administrator to indicate "N/A" if appropriate.
5. If the site administrator indicates that the site provides culturally appropriate services an example must be provided.
6. Check the box under "Mailing Address" to indicate that the physical address and the mailing address for the site are the same.



The screenshot shows the 'Site Information' form. At the top, it says 'Please enter information pertaining to the clinical service site where the NHSC clinician(s) will serve. Organizations with more than one site (i.e. satellites) must submit a NHSC application for each clinical service site where the NHSC obligated clinician will practice.' Below this is the section 'PRACTICE SITE NAME AND LOCATION (Where the NHSC clinician will serve their obligation)'. The form includes fields for Site Name, Address Line 1, Address Line 2, City, State/Province/Region, Zip/Postal Code, County, Site Phone Number, Site Fax Number, Site E-mail Address, Site Web Address, Site Location (with radio buttons for Frontier, Urban, Rural), Site Classification, and Type of Site. There are also checkboxes for 'Is there an NHSC Loan Repayment Program applicant waiting for this site to be approved?' and 'Is this the first time applying to become a NHSC member-site?'. Below these are text fields for 'How long has your health facility/practice been in operation (years)?', 'Does the site serve as a teaching facility?', 'Medicare Number', 'Medicaid Number', and 'State Children's Health Insurance Number'. There are also checkboxes for 'Do you post signage indicating that you provide health care regardless of one's ability to pay?' and 'Do you provide culturally appropriate services?'. At the bottom, there is a 'Mailing Address' section with a checkbox 'Mailing Address is Same as Practice Site Name and Location' and fields for Address Line 1, Address Line 2, City, State, and Zip/Postal Code. At the very bottom right, there are two buttons: 'SAVE FOR LATER' and 'CONTINUE'.

Only the Type of Site must be completed to continue with the application; however, all required fields must be completed prior to submission. At any time the site administrator may select to "Save for Later" to save the information and return to the landing page.

## APPLICATION POINTS OF CONTACT (2/4)

This section of the application has identical functionality to the Manage Points of Contact tool discussed as part of Site Self Service (pg. 21).



## APPLICATION SUPPORTING DOCUMENTS (3/4)

The third page of the site application allows the site administrator to digitally upload supporting documents required to prove NHSC eligibility.

Unless otherwise noted, the documents that appear in the Selected Document Types table are required. The list of document types is filtered by the type of the site that is recertifying. Uploaded documents appear in the Uploaded Documents table.

When the site administrator is finished uploading documents, select continue to move to the next page of the recertification.

**Uploading a Document** (File Size Limit: 5 MB)

1. Select one or more document types for the document. A single document may contain several document types. (e.g. a single PDF file may have a Sliding Fee Schedule and Proof of Practice in one document.)
2. Select “Choose File” and browse and select the appropriate file
3. Select “Upload Document”

**Deleting a Document** – In the uploaded documents table, select “Delete” in the row of the document to delete that document

**Missing Document?** – If the site administrator does not have electronic versions of the required document, select the check box below “Missing Documents?” to indicate that additional documents will be faxed, mailed or emailed to the State Primary Care Office within two days.

The screenshot shows the 'Supporting Documents' page. At the top, it says 'Please upload the required documents listed below. If you do not have an electronic copy of these documents, you may elect to fax your documents to your respective state Primary Care Office. For a complete listing of all State Primary Care Offices and their respective contact information, please visit the [State Primary Care Office page](#). Faxed documentation must be submitted within 2 days of submission.' Below this, it says 'Please upload any additional documents required for this site recertification'. The main section is titled 'UPLOAD DOCUMENT' and contains three numbered instructions: 1. Select the type of document you are uploading. 2. Browse for the file on your computer using the dialog box below. 3. Select the Upload Document button. The document will then appear on the table below. Repeat these steps for each document you wish to upload to your recertification. Below the instructions is a section titled 'SELECT DOCUMENT TYPE(S):' with a link to 'More information about required documents, including samples or templates can be found on the [NHSC Sites and Communities Page](#).' There is a list of document types with checkboxes: Sliding Discount Fee Schedule, Proof of Practice (commercial lease agreement, state facilities license, articles of incorporation, or business license), Recruitment and Retention Plan (if available), Medicare, Medicaid, CHIP billing history for past 4 months (e.g., Accounts Receivable or a Summary Remittance Advice. Please do NOT include personally identifiable information in the billing history.), Curriculum Vitae, Current License to Practice, and Other Documentation Requested by NHSC or State Recommendation Authority. Below the list is a comment field with the text 'Comment (Required if Other documentation selected)'. There are two buttons: 'Choose File' (which shows 'No file chosen') and 'Upload Document'. Below the buttons is a section titled 'UPLOADED DOCUMENTS' with the text 'No documents have been uploaded for this request'. At the bottom, there is a section titled 'MISSING DOCUMENTS?' with a checkbox and the text 'I will send some or all of the required documents by fax, mail or electronically within 2 days of submission to my [State Primary Care Office](#).' There are two buttons at the bottom right: 'SAVE FOR LATER' and 'CONTINUE'.



## APPLICATION SITE AGREEMENT (4/4)

The final page of the site application is where the site administrator agrees to the NHSC Site Agreement.

### Agreement and Submission

1. Check the box certifying that the site meets and will continue to meet and NHSC site requirements
2. Digitally sign the recertification by entering the site administrator's password
3. Select "Submit"

**Agreement For All Participating NHSC Sites**

**NHSC SITE AGREEMENT:**

This Agreement certifies that the site named on this recertification meets all NHSC requirements as outlined below, and I, Christopher Kinter am authorized to provide such certification for the above named site.

I certify that the site named on this recertification:

1. Is located in and treats patients from the federally-designated Health Professional Shortage Area (HPSA).
2. Does not discriminate in the provision of services to an individual (i) because the individual is unable to pay; (ii) because payment for those services would be made under Medicare, Medicaid or the Children's Health Insurance Program (CHIP); or (iii) based upon the individual's race, color, sex, national origin, disability, religion, or sexual orientation. [May or may not be applicable to Tribally Run (638) Indian Health Service sites].
  - a. Uses a schedule of fees or payments for services consistent with locally prevailing rates or charges and designed to cover the site's reasonable costs of operation. [May or may not be applicable to Tribally Run (638) Indian Health Service sites].
  - b. Uses a discounted/sliding fee schedule to ensure that no one who is unable to pay will be denied access to services. This system

☐ I certify that FAMILY MEDICAL CENTER currently meets all requirements listed in the NHSC Site Agreement above and will continue to meet these requirements in order to maintain status as an NHSC-approved service site. I also verify that all the information given in this NHSC Site Recertification is accurate and complete to the best of my knowledge and belief. I understand that it may be investigated and certify that the information given in this request is accurate and complete to the best of my knowledge and belief. I understand that it may be investigated and that any false statement herein may be punished as a felony under U.S. Code, Title 18, Section 21001 and subject me to civil penalties under the Program Fraud Civil Remedies Act of 1996 (45 CFR 79). I understand that submitting my request does not guarantee its approval, and that it requires review for compliance with my obligation and program policies.

**PLEASE ENTER YOUR LOG-IN PASSWORD TO CONFIRM YOUR AGREEMENT:**

Sign with your password \*

**SUBMIT**

### What Happens Now?

Upon submission of the application, the system will check to ensure that all required fields on the application are complete. If any part of the application is incomplete, the system will inform the site administrator which sections require attention and/or correction.

The application is then sent to the appropriate State Primary Care Office (PCO) for review and recommendation. After the State PCO completes their review and recommendation the application is forwarded to the appropriate Regional Office for final review and decision. All of this happens automatically with no further action required by the site administrator.

When a final decision has been made on the application the site administrator will be notified of the decision and the information for the site will be updated in the system accordingly.



## SITE INFORMATION PAGE (OVERVIEW)

The Site Information Page provides, at a glance, all the tools the site administrator needs to manage their site. The Site Information Page is broken into three sections:

- 1. Site Information**

This section includes all the information about the site. The sections are expandable and include the contact information for a site, additional NHSC site

information and the site's main/administrative site's basic information (*if available*)

- 2. Self-Service**

This section provides tools for managing the site

- 3. Need Assistance?**

Additional tools and functionality for helping the site administrator solve problems

Each of these sections is examined in more detail below.

The screenshot displays the BCRS Program Portal interface for site administrators. The top navigation bar includes the BCRS logo, the text 'for SITE ADMINISTRATORS', and links for 'My Messages', 'Account Settings', and 'Log Out'. The main content area is divided into three sections, each highlighted with a numbered circle:

- Section 1: Site Information** (top right): Contains a table with site details and expandable sections for contact information, additional site information, and main/administrative site information.
- Section 2: Self-Service** (top left): Contains links for 'Manage Current Job Openings', 'Manage Points of Contact', and 'Update Site Information'.
- Section 3: Need Assistance?** (bottom left): Contains a search bar for 'I NEED TO ...' and links for 'Recertify' and 'Ask a Question'.

Site Name	Status	Expiration Date
Active Medical Site #2	Active (A)	08/23/2014
Web Address	BCRS ID	DUNS#
samplewebsite.com	251027	123456789

**CONTACT INFORMATION**

**ADDITIONAL SITE INFORMATION**

**MAIN/ADMINISTRATIVE SITE**

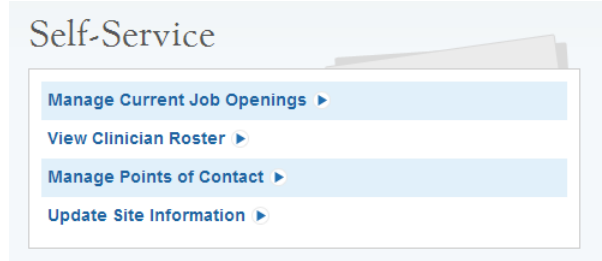


## SELF-SERVICE

The Self-Service section of the Site Information Page includes the following tools to help the site administrator:

**1. Manage Current Job Openings (pg. 17)**

This tool allows the site administrator to create new job postings that will appear on the Job Opportunities List (JOL)



**2. View Clinician Roster (pg. 20) *(only available for sites with clinicians in service)***

This tool allows the site administrator to view all the clinicians currently serving obligations as the site

**3. Manage Points of Contact (pg. 21)**

This tool allows the site administrator to update the points of contact (POCs) for this site

**4. Update Site Information (pg. 24)**

This tool allows the site administrator to update basic contact information for the site





## RECRUITMENT MANAGEMENT (MANAGE CURRENT JOB OPENINGS)

This tool allows the site administrator to manage the positions posted to the Job Opportunities List (JOL). Here the site administrator can create new open job postings, update current job postings and close non-valid job postings.

### Recruitment Management

<b>Site Name</b> Active Medical Site #1	<b>Status</b> Active (A)	<b>Address</b> 123 Main Street Anytown, VA 555555555	<b>Expiration Date</b> 08/23/2014
--	-----------------------------	--	--------------------------------------

Use the options below to create and edit job openings at your site. Changes made will be reflected on the [HRSA Job Opportunities List \(JOL\)](#) within 24 hours.

#### OPEN POSITIONS

ID	Discipline	Specialty	Allocation	Eligible For	Posting Expiration	Last Updated
59660	Physician Assistant	Family Practice	Full-Time	Loan Repayment Program	11/27/2011	08/23/2011
59661	Nurse Practitioner	Family Practice	Part-Time	Loan Repayment Program	10/31/2011	08/23/2011

[Create New Position](#) 

[History of Positions](#) 

The Open Positions table shows all the current job postings for that site. The table displays the following information:

1. **ID** – the unique ID number for the positions
2. **Discipline** – the discipline associated with the position
3. **Specialty** – the specialty associated with the discipline
4. **Allocation** – either “Full-Time” or “Part-Time”
5. **Eligible For** – the NHSC participant program that this position is eligible for, either “Loan Repayment Program” or “Loan Repayment or Scholar Program”
6. **Posting Expiration** – when the job posting will stop posting on the JOL (extendable by the site administrator)
7. **Last Updated** – the date the position was last edited

From this page the site administrator can:

1. Create a New Position
2. View/Edit Existing Open Positions
3. View a History of Positions

**\*\*The History of Positions will display a list of all vacancies that closed or expired after September 7, 2011\*\***



## CREATE A NEW POSITION

The Create New Position screen allows the site administrator to create a new open job posting for the Job Opportunities List (JOL). The screen will only allow the site administrator to create position postings that correspond to the Health Professional Shortage Areas (HPSAs) designated to the site. The paragraph at the top of the page indicates which HPSA types are designated for the site (Primary Care, Dental and/or Mental Health).

When creating a new position posting, the site administrator enters the following information (*all fields are required*):

The screenshot shows the 'Create New Position' form. At the top, it says 'Please enter the following information regarding your position. Your site is located in a Health Professional Shortage Area (HPSA) of the following discipline(s): Primary Care, Dental, Mental Health. You may create a limited number of Scholar and Loan Repayor positions that correspond to one of the above HPSA disciplines. For information regarding the limitations on the number of Scholar and Loan Repayor positions you can create, please refer to the Federal Register.'

The form fields are:

- Discipline \* (Dropdown menu)
- Specialty \* (Dropdown menu)
- Eligible For \* (Dropdown menu)
- Allocation \* (Radio buttons for Full-Time and Part-Time)
- Estimated Hours Per Week \* (Text input)
- Projected Hire \* (Text input with a calendar icon)
- Position Description \* (Text area, 250 characters maximum)
- Posting Start Date \* (Text input with a calendar icon)
- Posting Expiration Date \* (Text input with a calendar icon and a 'Set Maximum Expiration' button)

A 'CREATE' button is located at the bottom right of the form.

1. **Discipline** – The discipline for the position; filtered by the HPSAs designated for the site
2. **Specialty** – The specialty for the position; filtered by the Discipline selected

**\*\*Each position is assigned to a HPSA based on the Discipline and Specialty combination selected\*\***

3. **Eligible For** – The NHSC participant program for which service credit can be gained.  
This field is filtered by the score of the HPSA assigned to the position from the discipline and specialty combination and the currently enforced program limits as defined in the Federal Register (<http://nhsc.hrsa.gov/communities/apply.htm>)
4. **Allocations** – The full-time or part-time designation for the position
5. **Estimated Hours** – The number of hours per week the position is to fill
6. **Projected Hire** – The date by which the site administrator is targeting the position to be filled
7. **Position Description** – A brief description of the position outlining the important functions of the position

Each position must have a Posting Start Date and Posting Expiration Date.

**Posting Start Date** – The date on which the position posting should first appear on the JOL (new positions may take **up to 24 hours** from creation to appear on the JOL); cannot be before the current date.

**Posting Expiration Date** – The date on which the position posting should be removed from the JOL if not filled or closed beforehand. Posting Expiration Date can initially be a *maximum* of 90 days past the posting start date. The Set Maximum Expiration Button ( **Set Maximum Expiration** ) can be used to automatically calculate and enter the maximum expiration date for the position posting.



## VIEW/EDIT A POSITION

The View/Edit Position Screen for open positions allows the site administrator to edit the attributes of the position.

All the same rules for the fields apply as when creating the position. For a description of the fields and rules, please refer to the Create New Position Section (pg. 18).

**Adjusting Posting Expiration Date** - the site administrator can change the posting expiration date. The new date can be set to a *maximum* of 90 days past the current date or 90 days past the Posting Start Date (*only if the Posting Start Date is in the future*).

**View/Edit Position**  
\* Required fields

Please enter the following information regarding your position. Your site is located in a Health Professional Shortage Area (HPSA) of the following discipline(s): **Mental Health, Dental, Primary Care**. You may create a limited number of Scholar and Loan Repayor positions that correspond to one of the above HPSA disciplines. For information regarding the limitations on the number of Scholar and Loan Repayor positions you can create, please refer to the Federal Register.

Status: Open

Discipline \*: Physician Assistant

Specialty \*: Family Practice

Eligible For \*: Loan Repayment Program

Allocation \*: ☒ Full-Time ☐ Part-Time

Estimated Hours Per Week \*: 40

Projected Hire \*: 09/04/2011

Position Description \*: (250 characters maximum)

The position will be available on the **Job Opportunities List (JOL)** on the Posting Start Date and will be removed on the Posting Expiration Date. The Posting Expiration Date may not exceed 90 days from today or the Posting Start Date, whichever is later.

Position ID on JOL: 59660

Posting Start Date \*: 08/29/2011

Posting Expiration Date \*: 11/27/2011 **Set Maximum Expiration**

**CANCEL CLOSE POSITION SAVE**

## CLOSING A POSITION

To close an open position, on the View/Edit Position Screen, select the “Close Position” ( **CLOSE POSITION** ) button. A confirmation screen will appear. The site administrator must provide a reason for closing the vacancy. The current available reasons are:

- **Position is Filled** – the position has been filled outside the NHSC (*when an NHSC position is matched to an open position at a site the status of the position will update automatically*)
- **No Longer an Open Position** – the position is not being offered any longer

**Close Position**  
\* Required fields

Please choose the reason why you are closing this position before the Posting Expiration Date. By doing so, it will be permanently removed from the Job Opportunities List (JOL) within 24 hours.

Reason for Closing Vacancy \*: Please Select...

**CANCEL CLOSE**

Only after a reason for closure has been entered can the position be closed.



## CLINICIAN ROSTER (VIEW CLINICIAN ROSTER)

The site administrator has the ability to view a list of NHSC clinicians currently serving a service obligation at their site. If a site has one or more NHSC clinicians in service, the “View Clinician Roster” tool will be available under “Self-Service” on the Site Information Page.

The clinician roster lists all NHSC clinicians who are currently fulfilling their service obligation at your site. Clinicians which are not part of the NHSC will not be shown here.

### CLINICIAN ROSTER

Clinician	Discipline	Specialty	Program	Allocation	Start Date	Obligation End Date
	Certified Nurse Midwife	None	Loan Repayment Program	Full-Time	4/26/2011	12/9/2012

The Clinician Roster includes the following information:

1. **Clinician** – the name of the clinician in service
2. **Discipline** – the discipline of the clinician
3. **Specialty** – the specialty of the clinician
4. **Program** – the NHSC program for the clinician; either Loan Repayment or Scholar Program
5. **Allocation** – full-time or part-time
6. **Start Date** – the initial date the clinician began fulfilling service obligation at the site
7. **Obligation End Date** – the current date the clinician will fulfill their service obligation



## MANAGE POINTS OF CONTACT (POC)

The Site Point of Contacts (POC) table shows, at a glance, all the POCs currently associated with the site.

Site Points of Contact (POC)

Name	Type of Contact	Address	Phone	Email	
Sample POC ▶	Recruitment Contact	123 Main Street Anytown, VA 999990000	(123) 456-7890		Remove
Sample POC #2 ▶	NHSC Point of Contact	123 Main Street Anytown, VA 555555555	(555) 555-5555	sample@EXAMPLE.COM	Remove ▶

Add Another Site POC

The Site Points of Contact table provides the following information:

- Name** – the name of the POC  
If the name is in blue, then the POC is confirmed for that site and is editable by the site administrator, if the name is gray, then the POC is unconfirmed and is not editable by the site administrator.  
For more information on confirming POCs, see the Adding Points of Contact Section (pg. 22)
- Type of Contact** – the type of POC, only one type can be assigned to each contact  
A minimum of one Recruitment Contact is required for each site; this is the POC that is sent to the Job Opportunities List with open position postings
- Address** – the work address of the POC
- Phone** – the primary phone number for the POC
- Email** – the primary email address for the POC

From this screen the site administrator can:

- Remove a POC
- Add a POC
- Edit a POC

## REMOVING A POC

To remove a POC from the site, select the “Remove” link on the row of the POC to be removed. If the remove option is gray, then the POC cannot be removed.

A POC may not be removed in the following conditions:

- The POC is the site administrator currently viewing the table
- The POC is the only Recruitment Contact for the site  
To remove a POC designated as the only Recruitment Contact for a site, first designate another POC as a Recruitment Contact, the first POC is removable



## ADDING A POC

When adding a new POC to the site, the system provides three separate ways to locate and add a POC. Each method must be performed in the order listed.

### 1. Adding a POC from Within the Site's Network

The first method for adding a new POC is using the in-network dropdown menu. An “in-network” POC is an individual who serves as a POC as another site that is affiliated with the current site and the affiliation is on file with the NHSC. If the site has no other in-network sites or in-network POCs on record, the system will skip this method.

Name	Type of Contact	Address	Phone	Email
Sample POC ▶	Recruitment Contact	123 Main Street Anytown, VA 999990000	(123) 456-7890	ckinter@sapient.com Remove
Sample POC #2 ▶	NHSC Point of Contact	123 Main Street Anytown, VA 555555555	(555) 555-5555	sample@EXAMPLE.COM Remove ▶

**ADD POC FROM SITE NETWORK**  
Please search for your Point Of Contact within your current site network.

Please Select  ☐ I do not see my POC listed

To add a POC from within the site network, select the POC from the dropdown and select “Add”. POCs added using this method are automatically confirmed and their information is automatically editable in the Site POC Table.

If the desired POC is not listed, check the box next to “I do not see my POC listed” and select “Search NHSC Database” to continue to the next search method.

### 2. Searching the NHSC Database

The second method for adding a POC is searching for an existing POC in the NHSC database.

To search for a POC enter any criteria in the search fields and select “Search”. The POCs listed are POCs at other existing NHSC sites and are outside the

**ADD POC FROM NHSC DATABASE**  
To search for your Point Of Contact in the NHSC database, please enter one or more of the following criteria.

POC First Name

POC Last Name

POC Primary Email

POC Primary Phone Number

current site’s network. In the list of search results, select a POC. Only POCs at other sites are displayed through this search method. If the desired POC is also an NHSC clinician, please contact the NHSC for assistance.

When adding a POC using this method, the POC will be added as “unconfirmed” and will not be editable from the Site POC table. An email confirmation is sent to the newly added POC asking them to confirm the association. Once the POC confirms via the email, they will become editable in the Site POC Table.

If the desired POC is not found via search, check the box next to “No, my POC is not listed in these matches” and select “Enter New POC”.

**NOTE:** Only Points of Contact are displayed through this search method. If the desired POC is an NHSC clinician, please contact the NHSC for assistance.



### 3. Entering New POC Information

The third and final option for adding a new POC to a site is to manually enter the POC information. All required fields are marked with an asterisk (\*).

When entering an email address, use the work email address of the POC, not a personal email address. The email address must be unique for each POC across the NHSC.

The screenshot shows a web form titled "Enter New POC Information". Below the title is a sub-header: "Please enter the following information regarding your new POC." The form contains the following fields: "First Name \*" (text input), "Last Name \*" (text input), "Type of Contact \*" (dropdown menu with "Recruitment Contact" selected), "Primary Phone Number \*" (text input), "Secondary Phone Number" (text input), "Fax Number" (text input), "Email Address \*" (text input), "Address Line 1 \*" (text input), "Address Line 2" (text input), "City \*" (text input), "State/Province/Region \*" (dropdown menu with "Please Select..." selected), and "Zip/Postal Code \*" (text input). A yellow "SAVE" button is located at the bottom right of the form.

Upon saving the information the system will search for potential matches in the system. If matches are located, the site administrator will be prompted to either select a match or save the newly entered information.

POCs created using this method are automatically confirmed for the site and are immediately editable in the Site POC Table.

## EDITING A POC

Selecting an editable POC in the Site POC Table opens the Edit POC Information screen.

Here the site administrator can update the POC information as appropriate and select "Save". All required fields are marked with an asterisk (\*).

### Updating Your Own Information

When site administrators update their own records, they cannot update their name or email address from this page. In order to change their name, site administrators need to contact BCRS. To change their email address, site administrators need to use the Account Settings tool (pg. 5)

The screenshot shows a web form titled "Edit POC Information". Below the title is a sub-header: "Please enter the following information to modify to your existing Point Of Contact." The form contains the following fields: "First Name \*" (text input with "Sample" entered), "Last Name \*" (text input with "POC #2" entered), "Type of Contact \*" (dropdown menu with "NHSC Point of Contact" selected), "Primary Phone Number \*" (text input with "(555) 555-5555" entered), "Secondary Phone Number" (text input with "(555) 555-5555" entered), "Fax Number" (text input with "(555) 555-5555" entered), "Email Address \*" (text input with "sample@EXAMPLE.COM" entered), "Address Line 1 \*" (text input with "123 Main Street" entered), "Address Line 2" (text input), "City \*" (text input with "Anytown" entered), "State/Province/Region \*" (dropdown menu with "Virginia" selected), and "Zip/Postal Code \*" (text input with "55555-5555" entered). A yellow "SAVE" button is located at the bottom right of the form.

### Updating Other POCs Information

Site administrators have the ability to update the information for other POCs at their site(s). If the POC the site administrator wishes to edit has registered a portal account, the site administrator will *not* be able to change their name or email address. If the POC the site administrator wishes to edit has not registered a portal account, the site administrator will be able to edit all fields.

Whenever POC information is changed, the POC whose record was changed will receive an email notifying them of the change.



## UPDATE SITE INFORMATION

The site administrator can update certain site information for their site. The information that the site administrator can update directly on the portal is limited to information that does not affect NHSC eligibility or Health Professional Shortage Area (HPSA) designation.

Update Site Information

If you would like to update information not available on this page, please [contact us](#) >

Site Phone Number	<input type="text"/>	Site Email Address	<input type="text"/>
Site Fax Number	<input type="text"/>	Site Website Address	<input type="text"/>
		DUNS Number	<input type="text"/>

**UPDATE**

To update the information, the site administrator enters the new information into the appropriate field and selects “Update”. The information that a site administrator can update is as follows:

1. **Site Phone Number** – the general phone number for the site
2. **Site Fax Number** – the general fax number for the site
3. **Site Email Address** – the general email address for the site
4. **Site Website Address** – the web address for the site’s website
5. **DUNS Number** – a nine-digit unique identifier number

If the site administrator needs to update any other information about the site (i.e. site name, address, site type, etc...), please contact NHSC using the “Contact Us” link at the top of the page as this information may affect NHSC eligibility.

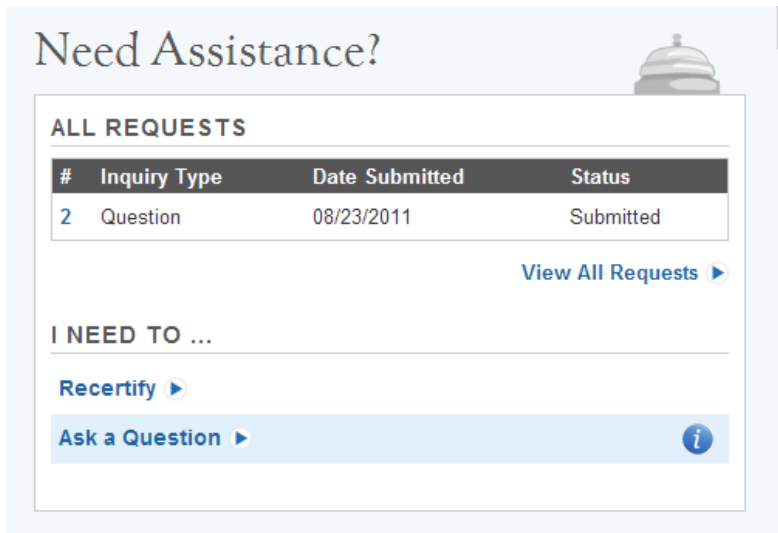




## NEED ASSISTANCE? (SITE INFORMATION PAGE)

The Need Assistance section of the Site Information Page allows the site administrator to perform three actions:

1. **View Submitted Requests**  
Recent requests submitted for the site will appear in the table with older requests in the “View All Requests” link
2. **Recertify**  
Submit a recertification for the site when it is about to expire
3. **Ask a Question**  
Ask BCRS a question using the inquiry feature



**Need Assistance?**

**ALL REQUESTS**

#	Inquiry Type	Date Submitted	Status
2	Question	08/23/2011	Submitted

[View All Requests](#)

**I NEED TO ...**

[Recertify](#)

[Ask a Question](#)

## VIEWING REQUESTS

The “All Requests” table on the Site Information page includes requests with action in the past 30 days. To view older requests, the “View All Requests” link will display tables for all “open” requests and a history of all “closed” requests for the site. Selecting a request from either of the tables will open a page with the request details and any actions the site administrator can perform. The information in the tables includes:

1. **Request Type** – identifies the type of request
2. **Date Submitted** – the date the request was first submitted
3. **Date Last Updated** – the date the request was last modified, or action was taken
4. **Status** – status of the request, either “Submitted”, “Open” or “Closed”



## SITE RECERTIFICATION

The “Recertify” link will appear when a site is able to recertify. NHSC sites are required to recertify every three (3) years in order to maintain eligibility. In order to initiate a recertification the site must:

- Have an approved initial site application on file
- Not have an existing site recertification in process
- Not be in “Terminated” status
- Not receive funding through the Bureau of Primary Health Care (BPHC) (*recertification not required*)
- Not be a “federal” site (IHS, ICE, Federal BOP, etc...) (*recertification not required*)

The recertification contains three pages of information to be completed by the site administrator.

### RECERTIFICATION SITE INFORMATION (1/3)

The first page of the site recertification is the site information page. All the site’s information, main/administrative site information, and site point of contact information is included on this page. The information this page is read only and reflects the information NHSC has on file. If the site administrator needs to make changes to the information, use the Site Information Update tool (pg. 24).

The box on the screenshot to the right outlines eight required questions that the site administrator must answer in order to submit the recertification.

The fields for **Medicare Number**, **Medicaid Number**, and **Children’s Health Insurance Number** are text fields where a site administrator can enter “N/A” for the site as appropriate.

At any time during the recertification process, the site administrator can “Save for Later” to save the information and complete the recertification later.

Site Information

Please verify that the information listed is correct and complete the additional questions below. If the information listed is not correct, please [update your site information](#).

**PRACTICE SITE NAME AND LOCATION** (Where the NHSC clinician will serve their obligation)

Site Name	Active Medical Site #1
Address Line 1	123 Main Street
Address Line 2	
State/Province/Region	Virginia
City	Anytown
Zip/Postal Code	55555555
Site Phone Number	
Site Fax Number	
Site E-mail Address	
Site Web Address	
Site Location	Urban
Site Classification	Private Non-Profit
Type of Site	Other Health Facility
Site SubType	Community Outpatient Facility

Is there an NHSC Loan Repayment Program applicant waiting for this site to be approved? \* ☐ Yes ☐ No

How long has your health facility/practice been in operation? (years) \*

Does the site serve as a teaching facility? \* ☐ Yes ☐ No

Medicare Number \*

Medicaid Number \*

Children's Health Insurance Number \*

Do you post signage indicating that you provide health care regardless of one's ability to pay? \* ☐ Yes ☐ No

Do you provide culturally appropriate services? \* ☐ Yes ☐ No

**SITE POINTS OF CONTACT (POC)**

Please verify the Point of Contact details listed below are correct. If the information is not correct, please [update your site POCs](#).

Name	Type of Contact	Address	Phone	Email
Sample User	Recruitment Contact	123 Main Street Anytown, VA 55555	(555) 555-5555	sampleuser@EXAMPLE.com
Sample User #2	Recruitment Contact	123 Main Street Anytown, VA 55555555	(555) 555-5555	sampleuser2@EXAMPLE.com

[SAVE FOR LATER](#) [CONTINUE](#)



## RECERTIFICATION SUPPORTING DOCUMENTS (2/3)

The second page of the site recertification allows the site administrator to digitally upload supporting documents required to prove NHSC eligibility.

Unless otherwise noted, the documents that appear in the Selected Document Types table are required. The list of document types is filtered by the type of the site that is recertifying. Uploaded documents appear in the Uploaded Documents table.

When the site administrator is finished uploading documents, select continue to move to the next page of the recertification.

The screenshot shows the 'Supporting Documents' page. At the top, it says 'Please upload the required documents listed below. If you do not have an electronic copy of these documents, you may elect to fax your documents to your respective state Primary Care Office. For a complete listing of all State Primary Care Offices and their respective contact information, please visit the [State Primary Care Office page](#). Faxed documentation must be submitted within 2 days of submission.' Below this, it says 'Please upload any additional documents required for this site recertification'. The main section is titled 'UPLOAD DOCUMENT' and contains three numbered steps: 1. Select the type of document you are uploading. 2. Browse for the file on your computer using the dialog box below. 3. Select the Upload Document button. The document will then appear on the table below. Repeat these steps for each document you wish to upload to your recertification. Below the steps is a section titled 'SELECT DOCUMENT TYPE(S):' with a link to 'More information about required documents, including samples or templates can be found on the [NHSC Sites and Communities Page](#).' There is a list of document types with checkboxes: Sliding Discount Fee Schedule, Proof of Practice (commercial lease agreement, state facilities license, articles of incorporation, or business license), Recruitment and Retention Plan (if available), Medicare, Medicaid, CHIP billing history for past 4 months (e.g., Accounts Receivable or a Summary Remittance Advice. Please do NOT include personally identifiable information in the billing history.), Curriculum Vitae, Current License to Practice, and Other Documentation Requested by NHSC or State Recommendation Authority. Below the list is a comment field with the text 'Comment (Required if Other documentation selected)'. There are two buttons: 'Choose File' (which says 'No file chosen') and 'Upload Document'. Below the buttons is a section titled 'UPLOADED DOCUMENTS' with the text 'No documents have been uploaded for this request'. There is also a section titled 'MISSING DOCUMENTS?' with a checkbox 'I will send some or all of the required documents by fax, mail or electronically within 2 days of submission to my [State Primary Care Office](#).' At the bottom right are two buttons: 'SAVE FOR LATER' and 'CONTINUE'.

### Uploading a Document (File Size Limit: 5 MB)

1. Select one or more document types for the document. A single document may contain several document types. (e.g. a single PDF file may have a Sliding Fee Schedule and Proof of Practice in one document,\.)
2. Select “Choose File” and browse and select the appropriate file
3. Select “Upload Document”

**Deleting a Document** – In the uploaded documents table, select “Delete” in the row of the document to delete that document

**Missing Document?** – If the site administrator does not have electronic versions of the required document, select the check box below “Missing Documents?” to indicate that additional documents will be faxed, mailed or emailed to the State Primary Care Office within two days.



## RECERTIFICATION SITE AGREEMENT (3/3)

The final page of the site recertification is where the site administrator agrees to the NHSC Site Agreement.

### Agreement and Submission

1. Check the box certifying that the site meets and will continue to meet and NHSC site requirements
2. Digitally sign the recertification by entering the site administrator's password
3. Select "Submit"

Agreement For All Participating NHSC Sites

**NHSC SITE AGREEMENT:**

This Agreement certifies that the site named on this recertification meets all NHSC requirements as outlined below, and I, Christopher Kinter am authorized to provide such certification for the above named site.

I certify that the site named on this recertification:

1. Is located in and treats patients from the federally-designated Health Professional Shortage Area (HPSA).
2. Does not discriminate in the provision of services to an individual (i) because the individual is unable to pay; (ii) because payment for those services would be made under Medicare, Medicaid or the Children's Health Insurance Program (CHIP); or (iii) based upon the individual's race, color, sex, national origin, disability, religion, or sexual orientation. [May or may not be applicable to Tribally Run (638) Indian Health Service sites].
  - a. Uses a schedule of fees or payments for services consistent with locally prevailing rates or charges and designed to cover the site's reasonable costs of operation. [May or may not be applicable to Tribally Run (638) Indian Health Service sites].
  - b. Uses a discounted/sliding fee schedule to ensure that no one who is unable to pay will be denied access to services. This system

☐ I certify that FAMILY MEDICAL CENTER currently meets all requirements listed in the NHSC Site Agreement above and will continue to meet these requirements in order to maintain status as an NHSC-approved service site. I also verify that all the information given in this NHSC Site Recertification is accurate and complete to the best of my knowledge and belief. I understand that it may be investigated and certify that the information given in this request is accurate and complete to the best of my knowledge and belief. I understand that it may be investigated and that any false statement herein may be punished as a felony under U.S. Code, Title 18, Section 21001 and subject me to civil penalties under the Program Fraud Civil Remedies Act of 1996 (45 CFR 79). I understand that submitting my request does not guarantee its approval, and that it requires review for compliance with my obligation and program policies.

**PLEASE ENTER YOUR LOG-IN PASSWORD TO CONFIRM YOUR AGREEMENT:**

Sign with your password \*

**SUBMIT**

### What Happens Now?

Upon submission of the recertification, the system will check to ensure that all required fields on the recertification are complete. If any part of the recertification is incomplete, the system will inform the site administrator which sections require attention and/or correction.

The recertification is then sent to the appropriate State Primary Care Office (PCO) for review and recommendation. After the State PCO completes their review and recommendation the recertification is forwarded to the NHSC for final review and decision. All of this happens automatically with no further action required by the site administrator.

When a final decision has been made on the recertification the site administrator will be notified of the decision and the information for the site will be updated in the system accordingly.



## ASK A QUESTION

The Ask a Question tool allows a site administrator to ask a question to BCRS.

The Ask a Question page provides a section for the site administrator to enter a message and a place to upload any documents to help BCRS understand the issue.

**Contact Us** – enter a message for BCRS in the space provided. The message can be a question, comment or correction that needs to be made.

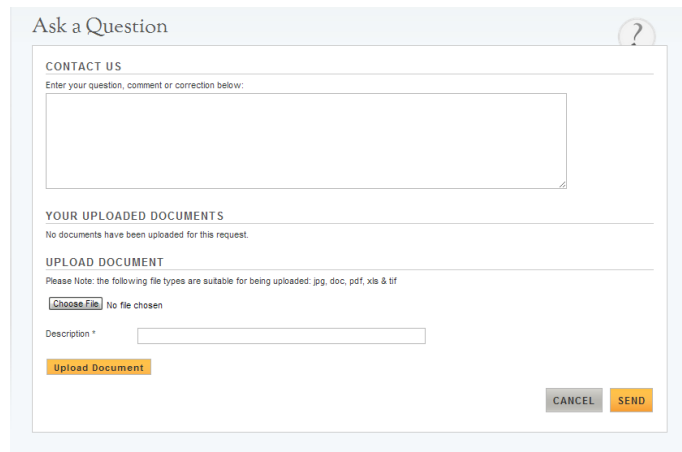
**Upload Document** (*File Size Limit: 5MB*) – the site administrator may upload any documents to help BCRS understand the issue. Any uploaded documents can be viewed in the Your Uploaded Documents section.

To upload a document:

1. **Select “Choose File”** – browse for and select a file
2. **Enter a Description** – a brief description of the file being uploaded; this is required
3. **Select “Upload Document”**

### What Happens Now?

After the site administrator selects “Send” the message is sent a BCRS intake team who will begin to work on answering the question or correcting the issue. BCRS may contact the site administrator with follow up messages as appropriate.



The screenshot shows the 'Ask a Question' form. At the top is a title bar with a question mark icon. Below it is a section titled 'CONTACT US' with the instruction 'Enter your question, comment or correction below:' and a large text area. Underneath is a section titled 'YOUR UPLOADED DOCUMENTS' with the message 'No documents have been uploaded for this request.' Below that is the 'UPLOAD DOCUMENT' section, which includes a 'Please Note' about supported file types (jpg, doc, pdf, xls & txf), a 'Choose File' button, and a 'Description \*' text field. At the bottom of the form are two buttons: 'Upload Document' and 'SEND'. A 'CANCEL' button is also visible on the right side of the form.

